



# Economic and Social Council

Distr.: General  
6 March 2019

English only

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## Commission on Narcotic Drugs

### Sixty-second session

Vienna, 14–22 March 2019

Item 9 (d) of the provisional agenda\*

**Implementation of the international drug control treaties: International cooperation to ensure the availability of narcotic drugs and psychotropic substances for medical and scientific purposes while preventing their diversion**

## Statement submitted by the International Association for Hospice and Palliative Care (IAHPC)\*\*

The Secretary-General has received the following paper, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

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\* [E/CN.7/2019/1](#).

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## Solving the opioid epidemics (Agenda Item 9d)

*“The limited availability of opioid analgesics in low- and middle-income countries is a cause of great concern, as many of the conditions requiring pain management, including cancer, are increasingly prevalent in such areas of the world. The medicines and knowledge to alleviate the situation exist and are affordable.”*

*INCB President, Dr. Viroj Sumyai*

*“Recent years have seen a sharp global rise in opioid overdose deaths. While such deaths were initially localised in North America, they now occur in some European countries, attributable to street heroin adulterated with clandestinely produced fentanyl and its analogues.”<sup>1</sup>*

### The problem: unbalanced drug policies

The two quotes highlighted above show how *unbalanced* drug policies have created two opioid epidemics: one of lack of access to medical treatment resulting in excruciating pain and suffering; the other of non-medical use of opioids, resulting in overdoses and sometimes in deaths. These two epidemics, affecting vulnerable populations in countries of all income levels, both deprive patients of legitimate access to controlled medicines *and* fail to prevent trafficking or curb non-medical use of internationally controlled substances, provoking serious public health harms for individuals, their families, and communities.

- Lack of access to opioids for legitimate medical use affects more than 70 per cent of the world’s population (largely in LMICs) in need of palliative care, safe surgery, treatment of substance use disorder, and other serious health conditions.<sup>2</sup> Unbalanced policies create the epidemic of untreated pain, one of the most serious inequities in health care, resulting in extreme suffering in the cruel face of poverty. *Unbalanced drug policies focus on supply control rather than supply chain strengthening and training of health system personnel to prescribe internationally controlled essential medicines.*<sup>3</sup>
- Non-medical use of illicitly manufactured and trafficked synthetic strong opioids has resulted in a public health crisis in several high-income countries. In addition, the non-medical use of an illicit, adulterated form of tramadol, a weak opioid, is causing widespread concern in some West and North African countries.<sup>4</sup> *Unbalanced drug policies focus on traditional supply control rather*

<sup>1</sup> Statement of the President of the International Narcotics Control Board, Viroj Sumyai, on the occasion of World Cancer Day. February 1, 2019 <https://www.incb.org/incb/en/news/press-releases/2019/statement-of-the-president-of-the-international-narcotics-control-board--viroj-sumyai--on-the-occasion-of-world-cancer-day.html>, <https://www.unodc.org/unodc/en/frontpage/2017/December/unodc-launches-publication-to-help-member-states-counter-opioid-crisis.html>.

<sup>2</sup> Knaul, F.M., Farmer et al. (2017). Alleviating the access abyss in palliative care and pain relief – an imperative of universal health coverage: the Lancet Commission report. *The Lancet*. <https://www.thelancet.com/commissions/palliative-care>. For data, see also <https://www.mia.as.miami.edu/initiatives/hemispheric-health/lancet-palliative-care/commission%20report/index.html> and [https://www.unodc.org/documents/postungass2016/follow-up/Special\\_Events/4th\\_Intersessional\\_CND\\_2017/Chapter\\_II/Access\\_to\\_Controlled\\_medicines\\_Vienna\\_UNODC\\_Sept\\_2017.pdf](https://www.unodc.org/documents/postungass2016/follow-up/Special_Events/4th_Intersessional_CND_2017/Chapter_II/Access_to_Controlled_medicines_Vienna_UNODC_Sept_2017.pdf).

<sup>3</sup> European Society for Medical Oncology. Governments failing to address “global pandemic of untreated cancer pain.” Press release, 29 September 2012. <http://www.esmo.org/Conferences/Past-Conferences/ESMO2012Congress/NewsPressReleases/ESMO2012PressReleases/Governmentsfailing-toaddressglobalpandemicofuntreatedcancerpain>; Pettus, K. (2017), Reasons for drug policy reform: millions of people are left with untreated pain. *BMJ*, vol. 356 p. j309.

<sup>4</sup> Klein, A. (2019). Drug Problem or Medicrime? Distribution and Use of Falsified Tramadol Medication in Egypt and West Africa. *Journal of Illicit Economies and Development*, 1(1). <http://eprints.gla.ac.uk/178065/1/178065.pdf>; Yorke, E., Oyebola, F.O., Otene, S.A., & Klein, A. (2019). Tramadol: a valuable treatment for pain in Ghana and Nigeria. *Current medical research and opinion*, (just-accepted), 1-1. <https://www.tandfonline.com/doi/abs/10.1080/03007995.2019.1585168>; IAHPIC Presentation to the 61st Expert Committee on Drug Dependence, Geneva 2018 <https://hospicecare.com/uploads/2018/11/IAHPIC%20Presentation%20-%2041st%20ECDD%20WHO%20Nov%202018.pdf>.

*than supply chain strengthening the professionalization of the pharmaceutical sector.*

- Countries with unbalanced drug policies will fail to achieve many goals and targets of the 2030 Agenda for Sustainable Development. Moreover, they will be unable to meet commitments flowing from multilateral Declarations approved at UNGASS 2016 and Astana 2018.

**Public health harms of the epidemics:** Unrelieved pain from advanced cancer, cardiovascular failure, traumatic injury, surgery, acquired immunodeficiency syndrome (AIDS), and other life-limiting illnesses, impacts all dimensions of quality of life, including patients' abilities to participate in family, social, economic, and spiritual activities. *Substance use disorders have similar impacts on affected patients and families.* The two epidemics are two sides of the same devalued coin – unbalanced drug policies.

**Non-medical use – inaccurate coverage:** Inaccurate media coverage of the epidemic in the United States of America and other countries<sup>5</sup> of non-medical use of illicitly manufactured and trafficked opioids, is generating unfounded fear that *improving* rational access to licit opioids for medical purposes will harm public health by resulting in increased non-medical use. *This non-evidence-based fear is harming legitimate patients.*

### **The Solution: the principle of balance**

Governments have a *dual*, not a *dueling*, obligation to establish a system of control that ensures the adequate availability of and access to controlled medications for medical and scientific purposes while simultaneously preventing the illicit manufacturing, the diversion, trafficking and non-medical use of controlled substances. These are the central goals of the international control system. Governments whose populations are being harmed by both, or only one of, the opioid epidemics – untreated pain and/or non-medical use – can improve patient access *and* reduce non-medical use of opioids by applying the central principle of “balance” to their drug control policies and applying existing UNODC and WHO guidelines.<sup>6</sup>

**Balancing drug policies** that harm patients, their families, non-medical users, and *their* families, entails strengthening supply chains and providing evidence-based training for all medical professionals and health system administrators, including pharmacists, nurses, caregivers, and regulators in the rational use of controlled medicines and the treatment of persons with pain and with substance use disorder.

This multi-stakeholder effort involves partnerships between (inter alia) Ministries of Health, Drug Control, Education, and Finance, and civil society organizations such as the International Association for Hospice and Palliative Care (IAHPC).

**Normative and legal obligations of States parties:** Under international law, including under the three international drug control conventions, the WHO Constitution, the 2016 UNGASS Outcome Document, multiple World Health Assembly Resolutions, the 2030 Agenda for Sustainable Development, the Inter-American Convention on Human Rights, and the core United Nations human

<sup>5</sup> Singer, J.A., Sullum, J.Z., & Schatman, M.E. (2019). Today's nonmedical opioid users are not yesterday's patients; implications of data indicating stable rates of nonmedical use and pain reliever use disorder. *Journal of Pain Research*, 12, 617. See also Manchikanti, L., Sanapati, J., Benjamin, R.M., Atluri, S., Kaye, A.D., & Hirsch, J.A. (2018); Reframing the prevention strategies of the opioid crisis: focusing on prescription opioids, fentanyl, and heroin epidemic. *Pain physician*, 21(4), 309–326. <http://accurateclinic.com/wp-content/uploads/2018/08/Reframing-the-Prevention-Strategies-of-the-Opioid-Crisis-Focusing-on-Prescription-Opioids-Fentanyl-and-Heroin-Epidemic-2018.pdf>.

<sup>6</sup> UNODC “Ensuring availability of controlled medications for the relief of pain and preventing diversion and abuse”. [https://www.unodc.org/documents/drug-prevention-and-treatment/UNODC\\_2018\\_technical\\_guidance\\_on\\_promoting\\_access\\_at\\_national\\_level.pdf](https://www.unodc.org/documents/drug-prevention-and-treatment/UNODC_2018_technical_guidance_on_promoting_access_at_national_level.pdf).

rights conventions, governments have obligations to protect the health of their populations by ensuring adequate access to essential medicines (including those under international control) and preventing harmful use of controlled substances.<sup>7</sup>

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<sup>7</sup> Ezer, T., Lohman, D., & de Luca, G.B. (2018). Palliative Care and Human Rights: A Decade of Evolution in Standards. *Journal of pain and symptom management*, 55(2), S163–S169.